

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LW	68904	6/1/00
O.I.P.E. CLASSIFIER		5	6-13-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		60574	8-10-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	6/1/00
2	6/1/00
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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